

**FRESNO/KINGS/MADERA**  
**EMERGENCY MEDICAL SERVICES**

**HEALTH SERVICES AGENCY  
POLICIES AND PROCEDURES**

Manual	Emergency Medical Services Administrative Policies and Procedures	Policy Number 703  Page 1 of 4
Subject	Resolution of Quality Improvement Incidents	
References	California Code of Regulations, Title 22, Division 9 Division 2.5 of the California Health and Safety Code	Effective 05/01/86

**I. POLICY**

The EMS Medical Director will adhere to this policy when determining the appropriate resolution of a Quality Improvement incident for prehospital emergency medical care personnel.

**II. PROCEDURE**

**A.. Investigative Process**

1. The Fresno/Kings/Madera EMS Agency shall conduct an investigation of any allegation received from a credible source, including discovery through medical audit, customer complaint, and/or other medical professionals.
2. The investigative process shall be conducted pursuant to EMS Policy #710, and Title 22, Division 9, Chapter 6 of the California Code of Regulations (Emergency Medical Personnel Certification Review Process Guidelines). Prehospital Liaison Nurses and Prehospital Liaison Officers will assist the EMS Agency during the investigation.

**B. Determination of Appropriate Action**

1. The EMS Medical Director or designee shall determine what action, if any, should be taken as a result of the findings of the investigative process.
2. The nature of the action should be proportionate to and related to the severity of the deviation from EMS Policies and Procedures or Medical Care Protocols. It will also be proportionate to the risk to the public health and safety caused by the actions of the holder of, or applicant for, a prehospital EMS certificate.
3. Resolution will be determined by the following steps:
  - a. Critique - Every QI incident will be critiqued by staff from the EMS Agency to review all documents, the nature of the issue and possible resolution outcomes.

Approved By EMS Division Manager	Signatures on File at EMS	Revision  09/15/97
Fresno County EMS Medical Director	Signatures on File at EMS	
Kings and Madera Counties EMS Medical Director	Signatures on File at EMS	

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If additional information is needed, the EMS Agency will contact involved agencies for assistance.

If an agency has determined and implemented resolution, it should be included in the documentation of the QI Tracking form. However, an agency resolution is independent from any resolution prescribed by the EMS Agency.

- b The EMS Agency will resolve QI incidents as outlined in the QI tracking form. Resolution may be one or more of the following;
- (1) No action - After a complete investigation no action is necessary to resolve issue.
  - (2) Policy/Procedure Revision - QI issue is resolved with revision to EMS Policy and Procedure Manual or Medical Care Protocols.
  - (3) Educational Instruction - The appropriate EMS Medical Director will give EMS personnel feedback on the QI document to be reviewed by involved individuals and PLN/PLO.
  - (4) Meeting - A meeting will take place with involved individuals and the EMS Medical Director or designee to discuss the issues and additional actions to resolve.
  - (5) Remedial Education - Prescribed by EMS Medical Director to correct deficiencies. This may include written report, giving a C.E. class, reviewing Policy/Protocol, attending lectures, and/or additional clinical or field evaluations (up to 40 hours clinical or 240 hours field). This may also include being partnered with an individual of the same certification level during the first thirty days of a formal investigation.
  - (6) Written/Verbal Reprimand - This action will be documented and placed in individual's EMS training/accreditation file. May also be utilized for reoccurring deficiencies that cannot be corrected with remedial education.
  - (7) Referred to the State EMS Authority - Any incident which is a serious threat to public health and safety and/or may require disciplinary licensure action against EMS personnel as outlined in Title 22, Division 9, Chapter 6 of the California Code of Regulations (Emergency Medical Personnel Certification Review Process Guidelines). This may include;
    1. Placement of a license holder on probation.
    2. Suspension of license.
    3. Revocation of license
    4. Denial of license.
    5. Denial of renewal of license.

#### C Formal Investigation Process

Formal investigations can be divided into three categories

1. Formal investigations that require immediate suspension or probation of an individual's accreditation. An individual's accreditation will be suspended or placed on probation pending investigation due to an immediate threat to public health and safety. These incidents will be

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turned over to the State EMS Authority for possible licensure action within three (3) working days of the decision to suspend an accreditation. All information regarding the investigation will also be turned over to the State EMS Authority. The EMSA will then forward a decision within two (2) working days after receipt of the information to the F/K/M EMS Agency on the decision to continue or discontinue the suspension and/or place an individual's license on probation pending investigation. The individual's and individual's employer will be immediately notified upon receiving the EMSA's decision. Regardless of this decision, a formal investigation into the incident by the State EMS Authority and the EMS Agency will still continue.

2. Formal investigations that may require an individual to work with another individual of the same accreditation level during the course of an investigation due to a potential threat to public health and safety. This restriction cannot be greater than 30 days and shall be included in resolution of the incident. It is the responsibility of the employer to ensure compliance of this requirement.
3. Formal investigation without restriction.

D. Grounds for Disciplinary Action

1. A determination by the EMS Medical Director or designee that any of the following actions has occurred constitutes evidence of a threat to the public's health and safety and is cause for initiating disciplinary action:
  - a. Fraud in the procurement of any certification issued under Part 1 of Division 2.5 of the Health and Safety Code or local EMS policies and procedures.
  - b. Gross negligence.
  - c. Repeated negligent acts.
  - d. Incompetence.
  - e. The commission of any fraudulent, dishonest, or corrupt act which is substantially related to the qualifications, functions and duties of prehospital personnel.
  - f. Conviction of any crime which is substantially related to the qualifications, functions and duties of prehospital personnel. The record of conviction or certified copy thereof shall be conclusive evidence of such conviction.
  - g. Violating or attempting to violate directly or indirectly, or assisting or abetting the violation of, or conspiring to violate, any provision of Part I of Division 2.5 of the Health and Safety Code or of the regulations promulgated by the State EMS Authority pertaining to prehospital personnel.
  - h. Violating or attempting to violate any Federal or State statute or regulation which regulates narcotics, dangerous drugs or controlled substances.
  - i. Addiction to the excessive use of, or the misuse of, alcoholic beverages, narcotics, dangerous drugs or controlled substances.
  - j. Functioning outside the scope of the held certificate or independent of medical control in the EMS System, except as authorized by any other license or certification.
2. Failure to successfully complete the written or skills examination process is sufficient grounds for

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the denial of a certificate or the denial of the renewal of a certificate without a formal appeal process. These procedures are not intended to address denial of certification except when the denial is based on the Grounds for Disciplinary Action.

E. Quality Review Committee and Grievance Process for EMS Personnel

The Quality Review Panel is a subcommittee of the Medical Control Committee and advises the EMS Medical Director on actions and resolutions to a Formal Quality Improvement incident. This panel will consist of:

- a. One - Two Paramedics from the three-county region
- b. One - Two MICNs from the three-county region
- c. One Base Hospital physician
- d. EMS Medical Director or designee (Chair panel activities)
- e. EMS Quality Improvement Coordinator (document panel activities)

EMS personnel involved in the incident may request the Quality Review Panel to consider review of a particular incident. The individual may also request the committee to review an incident as a recommendation to the EMS Medical Director if the individual disagrees with the proposed resolution advocated by the EMS Medical Director. The request must be made in writing and received at the EMS Agency.

If the State EMS Authority has reviewed an incident and determined not to take licensure action, the Quality Review Panel may complete a review of the incident for local resolution.

At any point in an investigation, the EMS Agency may determine to cause an investigation to become a formal investigation.

H. Notification of Resolution

1. Formal Investigation - The EMS Medical Director or designee shall formally notify the individual(s) involved with the incident within five (5) working days after determination of what that resolution shall be. Notification shall be in writing and shall include all of the information that assists the EMS Medical Director in determining a resolution.
2. Routine Investigations - The EMS QI Coordinator will send a letter identifying QI incidents that have been resolved and closed to each provider or hospital agency.